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APPLICATION NO.	FILING DATE	FIRST NAMED		O INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/649,011	08/26/2003	Amit K		Kalhan	UTL 00290	5935	
	SYSTEM AND METHOD F TIONS COVERAGE NETW		GRAPHICAI	L LOCATION TO DETERM	INE WHEN TO EXIT AN I	EXISTING	
APPLN. TYPE	SMALL ENTITY	ISSUE FI	3E	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400		\$300	\$1700	06/09/2006	
EXAMINER		ART UNIT		CLASS-SUBCLASS	7		
PHUONG, DAI		2688		455-440000	_		
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) KYOCERA WIRELESS CORP. San Diego, California USA						document has been filed for	
Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government							
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	(from status indicated above MALL ENTITY status. See 3		☐ b. Applic	cant is no longer claiming SMA	ALL ENTITY status. See 37 (CFR 1.27(g)(2).	
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Authorized Signature all all all all all all all all all al			Date JUNE 2, 2006				
Typed or printed name	Kathleen L.	Connell		Registration	No. 45,344	44.	
This collection of informatian application. Confidential submitting the completed at this form and/or suggestion. Box 1450, Alexandria, Virgania 22313	ity is governed by 35 U.S.C. pplication form to the USPT of for reducing this burden, shinia 22313-1450. DO NOT:	11. The information 122 and 37 CFR 20. Time will vary ould be sent to the SEND FEES OR CO.	on is required 1.14. This co depending use Chief Inford COMPLETEI	to obtain or retain a benefit by llection is estimated to take 12 pon the individual case. Any mation Officer, U.S. Patent and FORMS TO THIS ADDREST	the public which is to file (and the public which is to file (and the mount of the mount of the distribution of the mount	nd by the USPTO to process) ing gathering, preparing, and ime you require to complete partment of Commerce, P.O. r for Patents, P.O. Box 1450,	

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